PART B -, FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed who

maintenance fee notifica	tions.		(a) specitying a new con	maintenance fees verspondence address	vill be mailed to the curre; and/or (b) indicating a se	nt correspondence address apparate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 55694 7590 03/11/2009				Note: A certificate of mailing can only be used for domestic mailings of the fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
1500 K STREET SUITE 1100	DDLE & REATH		I h St: ad tra	Cer ereby certify that th ttes Postal Service v dressed to the Mail nsmitted to the USP	tificate of Mailing or Tran is Fee(s) Transmittal is bei vith sufficient postage for f Stop ISSUE FEE addres TO (571) 273-2885, on the	nsmission ng deposited with the Unite itst class mail in an envelop is above, or being facsimil date indicated below.
	,		į.			(Depositor's name)
			<u> </u>			(Signature)
APPLICATION NO.	- Funda a Lac	1				(Date)
10/565,942	FILING DATE 07/12/2006		FIRST NAMED INVENTO	₹	ATTORNEY DOCKET NO.	CONFIRMATION NO.
TITLE OF INVENTION:		VATED PHOTODETEC	Katusmi Shibayama TOR		468845450	8287
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/11/2009
EXAMINER		ART ÚNIT	CLASS-SUBCLASS]		
BUDD, PAUL A		2815	257-434000	J		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR HAMAMATSU PHOTONICS K.K. Hamamatsu-shi, Shizuo Please check the appropriate assignee category or categories (will not be printed on the patent):					DUNTRY) a, Japan	
☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0573 (enclose an extra copy of this form).			
5. Change in Entity Statu a. Applicant claims:	SMALL ENTITY status	above) . See 37 CFR 1.27,	☐ b. Applicant is no lon-	er claiming SMALI	(ANY I	DEFICIENCIES)
NOTE: The Issue Fee and interest as shown by the re-	Publication Fee (if requients of the United State	ired) will not be accepted es Patent and Trademark	from anyone other than t Office.	ne applicant; a regist	ered attorney or agent; or ti	he assignee or other party in
Authorized Signature	1 / //	(L			UNE 8, 2009	
Typed or printed name				Registration No	48,183	
submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	application form to the is for reducing this burd ginia 22313-1450. DO i-1450.	JSPTO. Time will vary en, should be sent to the NOT SEND FEES OR C	depending upon the indiv Chief Information Office OMPLETED FORMS TO	inated to take 12 midual case. Any com r, U.S. Patent and T. THIS ADDRESS.	inutes to complete, including iments on the amount of the rademark Office, U.S. Department TO: Commissioner	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,
Under the Paperwork Redu	ction Act of 1995, no pe	rsons are required to resp	ond to a collection of info	rmation unless it dis	splays a valid OMB control	number.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.